



FEE TRANSMITTAL

MAIL STOP Patent Application

Complete If Known

Application No.	09/853,635
Filing Date	May 14, 2001
First Named Inventor	OLSON
Examiner Name	Kailash C. Srivastava
Group Art Unit	1651

Total Amount Of Payment (\$)**750.00**

Attorney Docket No. 59486.000002

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner for Patents is hereby authorized to charge indicated fees and credit any over payments to **Deposit Account No. 50-0206** in the name of Hunton & Williams LLP.

2. ☒ Check Enclosed. The Commissioner for Patents is hereby authorized to charge any variance between the amount enclosed and the Patent Office charges to **Deposit Account No. 50-0206** in the name of Hunton & Williams LLP, 1900 K Street, N.W., Suite 1200, Washington, D.C. 20006-1109.

FEE CALCULATION

1. **BASIC FILING FEE** ☐ Large Entity ☐ Small Entity

FEE PAID

Utility Filing Fee \$
Design Filing Fee \$
Plant Filing Fee \$
Reissue Filing Fee \$
Provisional Filing Fee \$

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Description	Fee Paid
<input type="checkbox"/> Surcharge - late filing fee or oath	\$
<input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet	\$
<input checked="" type="checkbox"/> <u>2</u> Month Extension of Time	\$ 420.00
<input checked="" type="checkbox"/> Notice of Appeal	\$ 330.00
<input type="checkbox"/> Filing Brief in Support of Appeal	\$
<input type="checkbox"/> Request for Oral Hearing	\$
<input type="checkbox"/> Utility Issue Fee (or Reissue) (including Publication Fee, if necessary)	\$
<input type="checkbox"/> Design Issue Fee	\$
<input type="checkbox"/> Plant Issue Fee	\$
<input type="checkbox"/> Petition to Commissioner	\$
<input type="checkbox"/> Petition to Revive (Unavoidable)	\$
<input type="checkbox"/> Petition to Revive (Unintentional)	\$
<input type="checkbox"/> Petitions Related to Provisional Applications	\$
<input type="checkbox"/> Submission of Information Disclosure Statement	\$
<input type="checkbox"/> Filing Submission After Final Rejection	\$
<input type="checkbox"/> Recording Each Patent Assignment Per Property	\$
<input type="checkbox"/> Filing Request for Reexamination	\$
<input type="checkbox"/> Other (specify) _____	\$

2. EXTRA CLAIMS FEES

CLAIMS AS AMENDED

For	Number Present	Highest Number Paid For	Extra	Rate		Amount
				Large Entity	Small Entity	
TOTAL CLAIMS		20	0	x \$ 18.00	x \$ 9.00	\$ 0.00
INDEPENDENT CLAIMS		3	0	x \$ 86.00	x \$ 43.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS				\$ 290.00	\$ 145.00	\$ 0.00
TOTAL EXTRA CLAIMS FEES						\$ 0.00

SUBMITTED BY

Complete (if applicable)

Typed or Printed Name Jeffrey T. Perez

Registration No. 52,110

Signature

Date

November 17, 2003

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